

**Application Data Sheet****Application Information**

|                                  |   |
|----------------------------------|---|
| Application Number:              | To be assigned                          |
| Filing Date:                     | Herewith 21 October 2005                |
| Application Type::               | Regular                                 |
| Subject Matter::                 | Utility                                 |
| Suggested Classification::       |   |
| Suggested Group Art Unit::       |   |
| CD-ROM or CD-R?::                | None                                    |
| Title::                          | DEVICE FOR BEAUTY TREATMENT<br>OF LIMBS |
| Attorney Docket Number::         | 242/9-2162                              |
| Request for Early Publication?:: | No                                      |
| Request for Non-Publication?::   | No                                      |
| Suggested Drawing Figure::       |   |
| Total Drawing Sheets::           | 2                                       |
| Small Entity::                   | Yes                                     |
| Petition included?::             | No                                      |
| Secrecy Order in Parent Appl.?:: | No                                      |

**Applicant Information**

|                              |          |
|------------------------------|----------|
| Applicant Authority type::   | Inventor |
| Primary Citizenship Country: | ITALY    |
| Status::                     | Full     |
| Given Name::                 | Marcello |

Family Name:: CECCARINI  
City of Residence:: Fano  
State or Province of Residence::  
Country of Residence:: ITALY  
Street of mailing address:: Via Lago di Garda, 33  
City of mailing address:: Fano  
State or Province of mailing address::  
Postal or Zip Code of mailing address:: I-61032

#### Correspondence Information

|                                   |       |  |
|-----------------------------------|-------|--|
| Correspondence<br>Customer Number | 28147 |  |
|-----------------------------------|-------|--|

Phone number:: (203) 366-3560  
Fax Number:: (203) 335-6779  
E-Mail address:: wjspatent@aol.com

#### Representative Information

|                                   |       |  |
|-----------------------------------|-------|--|
| Representative Customer<br>Number | 28156 |  |
|-----------------------------------|-------|--|

#### Foreign Priority Information

|          |                        |              |                   |
|----------|------------------------|--------------|-------------------|
| Country: | Application<br>Number: | Filing Date: | Priority Claimed: |
| ITALY    | BO2003A000265          | 5 May 2003   | YES               |

### **Assignee Information**

Assignee Name: C.M.L. S.R.L.

Street of Mailing Address: Via Ugo La Malfa 37

City of Mailing Address: Bellocchi Di Fano (PU)

State or Province of Mailing Address:

Country of Mailing Address: ITALY

Postal or Zip Code of Mailing Address: I-61030